| <u></u>   |                               |                                 |                      |                                      |              |                       |              | Application or Docket Number |                        |      |                               |                        |  |
|---|-------------------------------|---------------------------------|----------------------|--------------------------------------|--------------|-----------------------|--------------|------------------------------|------------------------|------|-------------------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  |                               |                                 |                      |                                      |              |                       |              |                              |                        |      |                               |                        |  |
| <u></u>   | - SI AING                     | CLAIMS AS                       | S FILED -<br>(Column |                                      | -            | umn 2)                |              | SMALL ENTITY TYPE            |                        | OR   | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| 10  | OTAL CLAIMS                   |                                 | 21                   |                                      |              |                       |              | RATE                         | FEE                    | 7    | RATE                          | FEE                    |  |
| FC  | )R                            |                                 | NUMBER               | FILED                                | NUM          | BER EXTRA             | 1.           | BASIC FE                     | € 355.00               |      | BASIC FEE                     |                        |  |
| TOTAL CHARGEABLE CLAIMS   |                               |                                 | .20mi                | . 2 <b>⊘</b> minus 20=               |              | . Ø                   |              | X\$ 9=                       | 8                      | OR   | V(0.4.0                       |                        |  |
| INDEPENDENT CLAIMS  |                               |                                 |                      | 3 minus 3 =                          |              | *                     |              | X40=                         | <del>  ``</del>        | ا ا  | X80=                          |                        |  |
| ΜU  | JLTIPLE DEPEN                 | NDENT CLAIM P                   | RESENT               | RESENT                               |              |                       | 1            | · ·                          | <del> </del>           | OR   |                               |                        |  |
| * If  | the difference                | in column 1 is                  | loss than 7          | ara: entai                           | - "O" in /   | lumm 0                | <b>'</b> . ] | +135=                        |                        | OR   | +270=                         | <u></u>                |  |
| ••  |                               |                                 |                      | ess than zero, enter "0" in column 2 |              |                       |              | TOTAL                        | 364                    | OR   | TOTAL                         |                        |  |
|   | C                             | Calumn 1)                       | MENDE                |                                      |              |                       |              | ~****                        | 355                    |      | OTHER                         |                        |  |
|   |                               | (Column 1)<br>CLAIMS            |                      | (Colun                               |              |                       | ,<br>1 r     | SMALL                        | ENTITY                 | OR   | SMALL                         |                        |  |
| AMENDMENT A   |                               | REMAINING<br>AFTER<br>AMENDMENT |                      | NUME<br>PREVIO<br>PAID F             | BER<br>OUSLY | PRESENT<br>EXTRA      |              | RATE                         | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| ENDM  | Total                         | *                               | Minus                | **                                   |              | =                     |              | X\$ 9=                       |                        | OR   | X\$18=                        | 1                      |  |
| AM  | Independent                   | *                               | Minus                | ***                                  |              | =                     |              | X40=                         |                        | OR   | X80=                          | <del></del>            |  |
|   | FIRST PHESE                   | ENTATION OF MU                  | JLTIPLE DEF          | PENDENT                              | CLAIM        |                       | <b> </b>     |                              |                        | 1 1  |                               |                        |  |
|   |                               |                                 | ٠.                   |                                      |              |                       | L            | +135=                        |                        | OR   | +270=                         |                        |  |
|   |                               |                                 |                      |                                      |              |                       | Α            | TOTAL<br>ADDIT. FEE          |                        | OR , | TOTAL<br>ADDIT. FEE           |                        |  |
|   | Secretary of the secretary of | (Column 1)                      |                      |                                      |              | (Column 2) (Column 3) |              |                              |                        | _    | ·i                            |                        |  |
| MENDMENT B  |                               | REMAINING<br>AFTER<br>AMENDMENT |                      | NUME<br>PREVIO<br>PAID F             | BER<br>DUSLY | PRESENT<br>EXTRA      |              | RATE                         | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| ND<br>ND<br>N   | Total                         | *                               | Minus                | **                                   |              | =                     | [            | X\$ 9=                       |                        | OR   | X\$18=                        |                        |  |
|   | Independent                   | •                               | Minus                | ***                                  |              | = '                   | <b> </b>  -  |                              |                        | lt   |                               |                        |  |
| -   | FIRST PRESE                   | NTATION OF MU                   | JLTIPLE DEF          | PENDENT                              | CLAIM        |                       | <b> </b>     | X40=                         |                        | OR   | X80=                          |                        |  |
|   |                               |                                 | . ,                  |                                      |              |                       | L            | +135=                        |                        | OR   | +270=                         |                        |  |
|   |                               |                                 | ٠                    |                                      |              |                       | ΑI           | TOTAL<br>DDIT. FEE           |                        | OR A | TOTAL<br>ADDIT. FEE           |                        |  |
| —   |                               | (Column 1)<br>CLAIMS            |                      | (Colum                               |              | (Column 3)            |              |                              |                        |      |                               |                        |  |
| AMENDMENT C   |                               | REMAINING<br>AFTER<br>AMENDMENT |                      | HIGHE<br>NUMB<br>PREVIOL<br>PAID F   | BER<br>OUSLY | PRESENT<br>EXTRA      |              | RATE                         | ADDI-<br>TIONAL<br>FEE |      | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
| <u></u>   | Total                         | *                               | Minus                | **                                   |              | =                     |              | X\$ 9=                       |                        |      | X\$18=                        | 1                      |  |
| ME  | Independent                   | *                               | Minus                | ***                                  |              | =                     | ╽┠╴          |                              |                        | OR   | <del></del>                   |                        |  |
|   | FIRST PRESE                   | NTATION OF MU                   | LTIPLE DEP           | ENDENT                               | CLAIM        |                       | -            | X40=                         |                        | OR   | X80=                          |                        |  |
| +135= OR  |                               |                                 |                      |                                      |              |                       |              |                              |                        |      | +270=                         |                        |  |
| **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                               |                                 |                      |                                      |              |                       |              |                              |                        |      |                               |                        |  |